

*My Ministry Gift to*  
**Adventurous Christians**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

My Home Church: \_\_\_\_\_

Email \_\_\_\_\_

**My Monthly giving plan:**

- \$ 100 per month
- \$ 50 per month
- \$ 25 per month
- \$ \_\_\_ per month

**My One-time gift:**

- \$ 1,000
- \$ 500
- \$ 250
- \$ 100
- \$ \_\_\_\_\_ other

**My Total Gift Amount:**

Monthly pledge # months x amt \$ \_\_\_\_\_  
 + One-time gift \$ \_\_\_\_\_  
 = Total Annual Gift = \$ \_\_\_\_\_

**Choose your method of giving:**

- Cash enclosed
- Personal check
- Credit card monthly donations  
 amount to charge per month \$ \_\_\_\_\_  
 beginning \_\_\_/\_\_\_ thru \_\_\_/\_\_\_ (write in month/yr.)

Credit card one-time donation, amt. \$ \_\_\_\_\_

Master Card    Visa    Discover Card  
 Card number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_  
 Card Expiration date \_\_\_/\_\_\_

Signature \_\_\_\_\_



**Yes! I'd like to help AC continue making an impact in people's lives in 2009!**

- Kitchen Improvements
- General Operational Costs
- Where needed most

**Please complete next column and mail to:**

**ADVENTUROUS CHRISTIANS**  
**81 BOW ROAD**  
**GRAND MARAIS, MN 55604**

*Note: Your signature serves as a credit card authorization, to begin and end on the dates shown, with the monthly amount you've designated.*

*Your gifts will be receipted, and are tax-deductible as permitted by law to nonprofit organizations.*